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OFFICE OF EMERGENCY MEDICAL SERVICES

Administrative Requirements Manual

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A/R Title: Paramedic/Basic Staffing Waiver Supercedes: A/R 5-253 and 5-254 March 1993

PURPOSE:

To provide a mechanism that will facilitate efforts of an ambulance service licensed at the Paramedic level to expand its ability to provide Paramedic level response and services to medical emergencies at the local community level.

To define conditions for the review and approval of EMT-Paramedic/Basic staffing waivers for the Department and the Regional EMS Councils.

PROCEDURE:

An applicant may simultaneously apply for an initial ALS-Paramedic license and a Paramedic/Basic (P/B) waiver. An ALS service licensed at the Paramedic level may be granted a waiver under 105 CMR 170.275(A) and 105 CMR 170.305(C)(3)(a) 3. to provide ALS services at the Paramedic level with an ambulance staffed with one EMT-Paramedic and one EMT-Basic, provided that the following conditions are met:

1. The **ambulance service** shall:

- a. Meet all minimum standards for Massachusetts ambulance service licensure at the ALS-Paramedic level apart from Paramedic staffing requirements.
- b. If previously licensed, have a history of substantial compliance with the Massachusetts EMS Regulations, 105 CMR 170.000;
- c. Submit a plan, including timelines, demonstrating the ambulance service's plans to comply with ALS minimum staffing requirements set forth at 105 CMR 170.305 (C)(2). Waivers shall be issued coterminous with ambulance service license;
- d. Submit a preliminary request to the appropriate Regional EMS Council for recommendation at least ninety (90) days prior to anticipated start date. The following, at a minimum, must be submitted with the request:
 - (1) Letter of commitment from the applicant to comply with all conditions of the waiver;
 - (2) Letter of understanding, signed by an authorized municipal officer (for example, a mayor, City Council, or Board of Selectmen, etc.), acknowledging that ALS-Paramedic service will be provided under a P/B waiver;
 - (3) Copy of the service's signed affiliation agreement for medical control that explicitly addresses the P/B waiver;

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- (4) Documentation of how the proposed P/B waiver will permit ALS-Paramedic level care to be provided to persons who would not otherwise have access to such services in a timely fashion (for example, percentage of population who would have access to ALS who currently do not; number of calls where ALS was indicated per dispatch protocols but was not available; number of calls where ALS services were not provided because ALS arrived too late into the call);
- (5) Documentation of the service's inability to comply with minimum ALS-Paramedic staffing requirements as established in 105 CMR 170.305 (C) (2), including any financial or other significant hardship incurred by an ambulance service or a municipality based on its efforts to comply (for example, copies of budget requests, job postings, civil service lists reviewed, etc.);
- (6) Detailed description of the service's medical oversight structure;
- (7) Plan to utilize other available ALS resources for back up and to ensure appropriate level of staffing based on a patient's medical needs;
- (8) Plan for the training, orientation and mentoring of EMT personnel who will be working in EMT-Paramedic/Basic staffing assignments. This plan must include how the ambulance service will define levels of experience and how levels of experience will be used to:
 - (a) determine EMT staffing configurations, and
 - (b) provide appropriate training, orientation and mentoring of EMTs.
- (9) Description of clinical QA/QI processes that will ensure clinical oversight of operations under the Paramedic/Basic waiver;
- e. Submit written policies for screening of calls requesting an ambulance to ensure dispatch of appropriate resources;
- f. Submit written policies that ensure the timely transport of patients to appropriate health care facilities;
- g. Submit a written request for consideration of waiver renewal, if applicable, at least ninety (90) days prior to expiration date. Documentation pertaining to the renewal shall be submitted simultaneously to the Department and the appropriate Regional EMS Council.
- 2. The ambulance service's **affiliate hospital** shall:
 - a. Execute an affiliation agreement for medical control with the ambulance service that explicitly addresses the P/B waiver;



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- b. Ensure that standards of clinical care as defined by the Statewide Treatment Protocols, at a minimum, are met;
- c. Provide a structured clinical QA/QI process;
- d. Evaluate and ensure proficiency of EMT-Paramedic and EMT-Basic skills;
- e. Provide for the mentoring of EMT-Paramedics and EMT-Basics, who have not previously experienced working in P/B waviered systems;
- f. Ensure the remediation of EMT-Paramedic and EMT-Basic clinical skills when necessary; and
- g. Delegate to and coordinate medical control duties with a physician medical director, where applicable, within the ambulance service.

3. The **Regional EMS Council** shall:

- a. Review the waiver request to determine that the:
 - (1) Required waiver request documentation is complete; submittals that the Region determines to be incomplete shall be returned to the ambulance service for amendment;
 - (2) Proposed ALS staffing plan is necessitated by documented limited local resources; and,
 - (3) Proposed ALS staffing plan permits ALS services to be provided to persons who would not otherwise have access.
- **b.** Review requests for waiver renewal to determine, at a minimum, the progress a service made toward coming into compliance with the ALS-Paramedic staffing requirements as defined in 105 CMR 305 (C)(2).
- c. Forward the Regional EMS Council's recommendation, either for initial waiver or for renewal of waiver, to the Department within eight (8) weeks of receipt.

4 The **Department** shall:

- a. Review and may approve requests for EMT-Paramedic/Basic initial and renewal of staffing waivers on the basis of the:
 - (1) Regional EMS Council's recommendation;
 - (2) Submitted documentation;
 - (3) Conformance of the proposed staffing plan with the Massachusetts EMS regulations, the Department's administrative requirements and all established conditions of EMT-Paramedic/Basic staffing waivers and;
 - (4) The ambulance service's history of compliance with the Massachusetts EMS regulations and the Department's administrative requirements.

A/R 5-256

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b. Ensure that all EMTs, at all levels of certification, who work under P/B waivers have completed required, Department-approved training for P/B waivers; and

- c. Notify the ambulance service and the appropriate Regional EMS Council of its disposition of the waiver request. Such notification shall be done in writing within thirty (30) days of receipt of the completed request and Regional recommendation. The Department shall specify both the effective and expiration dates of the waiver and any other conditions established by the Department. The expiration date of a P/B staffing waiver shall not exceed the expiration date of the ambulance service's license.
- d. If the request is denied, the ambulance service shall have ninety (90) days to correct deficiencies and to resubmit an application.